ST. JOHN'S HOME OF MILWAUKEE 1840 NORTH PROSPECT AVENUE

MILWAUKEE 53202 Phone: (414) 272-20	)22	Ownership:	Non-Profit Corporation
Operated from 1/1 To 12/31 Days of Operation	on: 365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/02):	62	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/02):	95	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/02:	55	Average Daily Census:	61

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	Length of Stay (12/31/02) %				
Home Health Care Supp. Home Care-Personal Care	No No			Age Groups 	%		16.4 49.1
Supp. Home Care-Household Services	No	Developmental Disabilities	3.6	Under 65	5.5	More Than 4 Years	34.5
Day Services	No	Mental Illness (Org./Psy)	45.5	65 - 74	3.6	I	
Respite Care	No	Mental Illness (Other)	1.8	75 - 84	16.4	1	100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	41.8	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	32.7	Full-Time Equivale	ent
Congregate Meals	No	Cancer	1.8			Nursing Staff per 100 H	Residents
Home Delivered Meals	No	Fractures	7.3		100.0	(12/31/02)	
Other Meals	No	Cardiovascular	9.1	65 & Over	94.5		
Transportation	No	Cerebrovascular	10.9			RNs	16.1
Referral Service	No	Diabetes	1.8	Sex	%	LPNs	12.1
Other Services	No	Respiratory	5.5			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	12.7	Male	12.7	Aides, & Orderlies	51.2
Mentally Ill	No			Female	87.3		
Provide Day Programming for			100.0			I	
Developmentally Disabled	No				100.0	I	

## Method of Reimbursement

		edicare			edicaid itle 19			Other			Private Pay	<b>:</b>		amily Care			anaged Care	! 		
Level of Care	No.	00	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	90	Per Diem (\$)	No.	00	Per Diem (\$)	No.	olo	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	5	100.0	353	22	91.7	115	0	0.0	0	26	100.0	215	0	0.0	0	0	0.0	0	53	96.4
Intermediate				2	8.3	95	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.6
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	5	100.0		24	100.0		0	0.0		26	100.0		0	0.0		0	0.0		55	100.0

ST. JOHN'S HOME OF MILWAUKEE

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Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02											
Deaths During Reporting Period			m.+.1										
			0		% Needing	0 7 1 3 3	Total						
Percent Admissions from:		Activities of	- *		sistance of	2	Number of						
Private Home/No Home Health			-	One	Or Two Staff	1	Residents						
Private Home/With Home Health	8.2	Bathing	12.7		60.0	27.3	55						
Other Nursing Homes			12.7		60.0	27.3	55						
Acute Care Hospitals	71.4	Transferring	34.5		43.6	21.8	55						
Psych. HospMR/DD Facilities	0.0	Toilet Use	27.3		45.5	27.3	55						
Rehabilitation Hospitals	0.0	Eating	63.6		20.0	16.4	55						
Other Locations	10.2	******	*****	*****	*****	******	******						
Total Number of Admissions	49	Continence		%	Special Trea	tments	%						
Percent Discharges To:		Indwelling Or Extern	al Catheter	23.6	Receiving 1	Respiratory Care	0.0						
Private Home/No Home Health	19.6	Occ/Freq. Incontinent	t of Bladder	72.7	Receiving '	Tracheostomy Care	0.0						
Private Home/With Home Health	28.6	Occ/Freq. Incontinent	t of Bowel	58.2	Receiving :	Suctioning	0.0						
Other Nursing Homes	10.7				Receiving (	Ostomy Care	0.0						
Acute Care Hospitals	0.0	Mobility			Receiving '	Tube Feeding	1.8						
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	9.1	Receiving I	Mechanically Altered Diets	43.6						
Rehabilitation Hospitals	0.0				_	_							
Other Locations	12.5	Skin Care			Other Reside	nt Characteristics							
Deaths	28.6	With Pressure Sores		5.5	Have Advan	ce Directives	100.0						
Total Number of Discharges		With Rashes		0.0	Medications								
(Including Deaths)	56				Receiving :	Psychoactive Drugs	21.8						

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		Ownership: This Nonprofit			Size:		ensure:				
	This				-99	Ski	lled	Al	1		
	Facility	Facility Peer		Peer	Group	Peer	Group	Faci	lities		
	90	90	Ratio	olo	Ratio	olo	Ratio	ଚ	Ratio		
Occupancy Rate: Average Daily Census/Licensed Bed	ds 64.2	85.6	0.75	86.7	0.74	84.2	0.76	85.1	0.75		
Current Residents from In-County	98.2	88.1	1.11	90.3	1.09	85.3	1.15	76.6	1.28		
Admissions from In-County, Still Residing	18.4	23.6	0.78	20.3	0.91	21.0	0.87	20.3	0.90		
Admissions/Average Daily Census	80.3	134.2	0.60	186.6	0.43	153.9	0.52	133.4	0.60		
Discharges/Average Daily Census	91.8	140.2	0.65	185.6	0.49	156.0	0.59	135.3	0.68		
Discharges To Private Residence/Average Daily Cer	nsus 44.3	46.8	0.94	73.5	0.60	56.3	0.79	56.6	0.78		
Residents Receiving Skilled Care	96.4	90.1	1.07	94.8	1.02	91.6	1.05	86.3	1.12		
Residents Aged 65 and Older	94.5	96.3	0.98	89.2	1.06	91.5	1.03	87.7	1.08		
Title 19 (Medicaid) Funded Residents	43.6	52.8	0.83	50.4	0.87	60.8	0.72	67.5	0.65		
Private Pay Funded Residents	47.3	34.8	1.36	30.4	1.55	23.4	2.02	21.0	2.25		
Developmentally Disabled Residents	3.6	0.6	5.84	0.8	4.85	0.8	4.53	7.1	0.51		
Mentally Ill Residents	47.3	35.2	1.34	27.0	1.75	32.8	1.44	33.3	1.42		
General Medical Service Residents	12.7	23.7	0.54	27.0	0.47	23.3	0.55	20.5	0.62		
Impaired ADL (Mean)	47.6	50.5	0.94	48.9	0.97	51.0	0.93	49.3	0.97		
Psychological Problems	21.8	54.7	0.40	55.5	0.39	53.9	0.40	54.0	0.40		
Nursing Care Required (Mean)	6.4	7.2	0.88	6.8	0.94	7.2	0.88	7.2	0.88		